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I hereby appoint:						
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Practitioner(s) named below (if more then ten practitioners are to be named, then a customer number must be used):						
Name	Registr Numt	ation Name er Name		ame	Registration Number	
as attorney(s) or agent(s) to represent the undersigned before the United States Patent and Trademark Office (USPTO) in connection with any and all patent applications assigned only to the undersigned according to the USPTO assignment records or assignment documents attached to this form in accordance with 37 CFR 3.73(b).						
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act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be						
filed. SIGNATURE of Assignee of Record						
The individual whose signatur	e and title is sup	plied below is	authorized to act	on behalf of	f the assignee	
Signature				Date	2/03/07	
Name Adam Dicki	~50V			Telephone		
Title Director.						

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.